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CONFIRMATION NO. 7719

<b>SERIAL NUMBER</b> 10/830,177	<b>FILING OR 371(c) DATE</b> 04/21/2004 <b>RULE</b>	<b>CLASS</b> 706	<b>GROUP ART UNIT</b> 2129	<b>ATTORNEY DOCKET NO.</b> 45358.00002.CIP1
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## APPLICANTS

Scott B. Wilson, Del Mar, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/810,949 03/25/2004 which is a CON of 10/123,834 04/15/2002 PAT 6,735,467

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

-none-

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
06/28/2004

\*\* SMALL ENTITY \*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 81	<b>INDEPENDENT CLAIMS</b> 19
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS  
36183

## TITLE

Systems and methods for automatic and incremental learning of patient states from biomedical signals

<b>FILING FEE RECEIVED</b> 1622	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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